NOV 1 0 2005



PREMARKET NOTIFICATION SUBMISSION – 510 (k)

Date: 09-15-2005

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EXTERNAL FIXATION

510 (k) SUMMARY

> Applicant

: GexFix USA Inc.

1200 Clint Moore Rd. Suite # 1 Boca Raton, FL 33487

> Contact Person

: GexFix USA Inc. Mr. Lucio Improta

1200 Clint Moore Rd. Suite # 1

Tel. (561) 443-3321

e-mail: mmcintern@aol.com

> Submission Date

: May 15th, 2005

> Trade Name

: External Fixation

> Common Name

: External Fixation System

> Classification Name fixation fastener

: Smooth or threaded metallic bone

> Reg. #

: 888-3040 -

> Panel Code

: Orthopedic

> Prod. Code

: KTT

Indication for use:

The indication for use of this device are:

- 1) Bone fracture fixation;
- 2) Osteotomy
- 3) Arthodesis
- 4) Correction of deformity
- 5) Revision procedures where other treatments oe devices have been unsuccessful Bone reconstruction procedures





NOV 1 0 2005

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Lucio Improta GexFix USA, Inc. 1200 Clint Moore Road, Suite # 1 Boca Raton, Florida 33487

Re: K052605

Trade/Device Name: EXTERNAL FIXATION

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation

appliances and accessories

Regulatory Class: II Product Code: KTT

Dated: September 15, 2005 Received: September 23, 2005

Dear Mr. Improta:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Page 2 - Lucio Improta

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html

Sincerely yours,

Mark N. Melkerson

Acting Director

Division of General, Restorative and Neurological Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure



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Indications for Use

510(k) Number (if known): K052605

Device Name: EXTERNAL FIXATION

Indications for Use:

- 1) BONE FRACTURE FIXATION
- 2) OSTEOTOMY
- 3) ARTHODESIS
- 4) CORRECTION OF DEFORMITY
- 5) TREVISION PROCEDURES WHERE OTHER DEVICES HAVE BEE UNSUCCESSFUL
- 6) BONE RECONSTRUCTION PROCEDURES

(Division Sign-Off)

Division of General, Restorative, and Neurological Devices

510(k) Number Ko 52005

Prescription Use _X__(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)